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## WISCONSIN LEGISLATIVE COUNCIL AMENDMENT MEMO

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<b>2001 Assembly Bill 524</b>	<b>Assembly Substitute Amendment 1</b>
Memo published: October 31, 2001      Contact: Richard Sweet, Senior Staff Attorney (266-2982)	

### Assembly Bill 524

Assembly Bill 524 was introduced by the Joint Committee for Review of Administrative Rules (JCRAR) after that committee objected to a portion of Clearinghouse Rule 00-091. By way of background, current rules of the Department of Health and Family Services (DHFS) require that operational plans for the staffing of paramedic ambulances must ensure that the ambulance is staffed with at least two emergency medical technicians (EMTs)-paramedic (referred to in this memorandum as “paramedics”). [A physician, registered nurse, or physician assistant, trained in advanced cardiac life support, may replace one of the paramedics.]

In 2000, DHFS proposed a rule change that would allow such ambulances to be staffed with either two paramedics or with one paramedic and one other EMT if the medical director of the ambulance service specifically requests and authorizes this. DHFS later modified its proposed rule to allow ambulance services beginning paramedic service on and after January 1, 2000 to staff ambulances with one paramedic and one other EMT, but required that paramedic ambulance services that provided service prior to that date must use two paramedics. However, the modified rule specified that in those areas with paramedic ambulance services prior to January 1, 2000, the paramedics could be dispatched in separate vehicles and, after the patient has been assessed and stabilized, one paramedic may be released by protocol or verbal order from a physician.

Following an objection to a portion of Clearinghouse Rule 00-091 by the Senate Committee on Health, Utilities, Veterans and Military Affairs, JCRAR objected to the portion of the proposed rule that allows dispatch from separate locations and release of one paramedic after the patient has been stabilized for those ambulance services that provided paramedic service before January 1, 2000. JCRAR did not object to the portion of the proposed rule that allows a paramedic ambulance to be staffed with one paramedic and one other EMT (with medical director authorization) for paramedic ambulance services beginning on or after January 1, 2000. Assembly Bill 524 and a companion bill, Senate Bill 267, were introduced by JCRAR following the objection to the portion of the proposed rule.

Assembly Bill 524 requires that rules promulgated by DHFS that establish standards for operational plans for the staffing of paramedic ambulances may permit DHFS to approve an operational plan for an ambulance service provider that provided these services before January 1, 2000, only if the operational plan specifies *all* of the following for the transport of a patient in a prehospital setting:

- That the ambulance service provider ensures, in writing, that the ambulance is staffed with at least two paramedics, registered nurses, physician assistants, or physicians, or a combination of any two of these, who are trained in the use of all skills authorized by rule for a paramedic and are designated by the medical director of the ambulance service.
- That the ambulance staff is dispatched from the same site, together, to the scene of the emergency and returns, together, to the dispatching site.
- That if a paramedic arrives at the scene of an emergency prior to the arrival of the ambulance staff, the paramedic may provide services using all skills authorized by rule for a paramedic.

#### **Assembly Substitute Amendment 1**

Assembly Substitute Amendment 1 provides that rules promulgated by DHFS that establish standards for operational plans for the staffing of paramedic ambulances may permit DHFS to approve an operational plan only if the operational plan specifies *either* of the following for the transport of a patient in a prehospital setting:

- That the ambulance service provider ensures, in writing, that the ambulance is staffed with at least two paramedics, registered nurses, physician assistants, or physicians, or a combination of any two of these, who are trained in the use of all skills authorized by rule for a paramedic and are designated by the medical director of the ambulance service.
- That the ambulance service provider ensures, in writing, that the ambulance is staffed with at least one paramedic, registered nurse, physician assistant, or physician, who is trained in the use of all skills authorized by rule for a paramedic and is designated by the medical director of the ambulance service and either one EMT-intermediate or one EMT-basic, if the medical director specifically requests and authorizes this staffing in the operational plan.

The above provisions of the substitute amendment would apply to all paramedic ambulance services, not just those beginning service on or after January 1, 2000.

#### **Legislative History**

On October 22, 2001, the Assembly Committee on Public Health recommended adoption of Assembly Substitute Amendment 1 and passage of the bill, as amended, both on votes of Ayes, 6; Noes, 2.

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